

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 908,577 FILING DATE 5-22-78

APPLICANT(S) *Casten, et al*

CLAIMS	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	1	1	1	1	1	1	1	1	1	1	1
2	1		1									
3												
4	1		1									
5	3		3									
6	3		3									
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49												
50												
TOTAL IND.	1		1									
TOTAL DEP.	16	1	16	1								
TOTAL CLAIMS	17		17									